COVER SHEET FOR AMENDMENT OF POST-TRAVEL SUBMISSION

Date/TimeRECEIVED
SECRETARY OF THE SENATE
PUBLIC RECORDS
2018 OCT -9 PM 5: 17

Instructions: Use this form as a cover sheet for any paperwork you may need to submit to the Office of Public Records in order to make your Privately Sponsored Post-Travel Submission complete in accordance with Rule 35. Only complete this form if you need to submit an amendment to a post-travel filing you have already submitted.

SUBMIT DIRECTLY TO THE OFFICE OF PUBLIC RECORDS IN 232 HART BUILDING

| Name of Traveler: Katherine McClelland | |
|---|---|
| Employing Office/Committee: Senate HELP Co | ommittee |
| Travel Expenses Paid by (List all sources): | |
| Travel Date(s): August 28, 2018 - August 30, 2 | 2018 |
| | Pre-Travel Authorization, RE-1 |
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| Purpose of Amendment (describe the reason for a | mending original submission):This form was not submitted with |
| the post-travel packet. | |
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| 10-9-18 | Katherild (alle) |
| (Date) | (Signature of Traveler) |

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(Revised 10/19/15)

EMPLOYEE PRE-TRAVEL AUTHORIZATION

Pre-Travel Filing Instructions: Complete and submit this form at least 30 days prior to the travel departure date to the Select Committee on Ethics in SH-220. Incomplete and late travel submissions will not be considered or approved. This

ETHIC JUL26'18pm 3:29

Date/Time Stamp:

| form must be typed and is available as a fillable PDF on the Co at ethics.senate.gov. Retain a copy of your entire pre-travel su | |
|--|---|
| required post-travel disclosure. | omission for your |
| Name of Traveler: | erine McClelland |
| S | enate HELP Committee |
| Employing Office/Committee: | |
| Private Sponsor(s) (list all): | nina Foundation, and the Joyce Foundation |
| August 28, 2018 - August 30, 2018 Travel date(s): | |
| Note: If you plan to extend the trip for any reason you n | nust notify the Committee. |
| Destination(s): Detroit, MI | |
| Explain how this trip is specifically connected to the traveler's of | official or representational duties: |
| Jobs for the Future, the Lumina Foundation, and the Joyce foundation policy Congressional staff to discuss K-12, postsecondary, and fede the implementation of the Workforce Innovation and Opportunity Act responsibilities as the Ranking Member of the HELP Committee, the stakeholders who develop and implement these progams, including | ral workforce development and training programs, and review in Detroit, MI. Given Senator Murray's oversight and policy staff trip will present me the opportunity to engage with several |
| Name of accompanying family member (if any): Relationship to Employee: Spouse Child I certify that the information contained in this form is true, com | olete and correct to the best of my knowledge: |
| 1 outling that the many contraction of the many contractions and the many contractions are the many contractions and the many contractions are the m | |
| 7.20.13 (Date) | Signature of Employee) |
| TO BE COMPLETED BY SUPERVISING SENATOR/OFFICER (P | |
| Secretary for the Majority, Secretary for the Minority, and Chaplain): Senator Murray | Katherine McClelland |
| 1, hereby author (Print Senator's/Officer's Name) | (Print Traveler's Name) |
| an employee under my direct supervision, to accept payment or related expenses for travel to the event described above. I have duties as a Senate employee or an officeholder, and will not cre private gain. | determined that this travel is in connection with his or her |
| I have also determined that the attendance of the employee's sp | ouse or child is appropriate to assist in the representation |
| of the Senate. (signify "yes" by checking box) | |
| 7/26//y | Patty Murrey |
| (Date) | (Signature of Supervising Senator/Officer) |
| (Revised 10/19/15) | Form RE-1 |